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APPLICANTS

Christian Behrens, Leimen, GERMANY;

Volker Paul, Ruelzheim, GERMANY;

Steffen Rotsch, Rauenberg, GERMANY; Rene Dehn, Sinshelm, GERMANY;

** CONTINUING DATA *****

None RMT

** FOREIGN APPLICATIONS *****

None RMT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>RM</i>	GERMANY	7	23	4

ADDRESS

32864
 FISH & RICHARDSON, P.C.
 PO BOX 1022
 MINNEAPOLIS, MN
 55440-1022

TITLE

Intermediate software layer

FILING FEE RECEIVED 910	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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